

09/646924

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 646924 ✓  
IA NUMBER: PCT/ EP99 / 02001 ✓  
FAMILY NAME: RASPE ✓  
GIVEN NAME: ERIC ✓  
PRIORITY CLAIMED (Y/N): Y ✓  
NO BASIC FEE (Y/N): N ✓  
ATTORNEY DOCKET NUMBER: MERCK 2157 ✓  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 7032436333 ✓  
FAX  
NAME: MILLEN WHITE ZELANO & BRANIGAN ✓  
ARLINGTON COURTHOUSE PLAZA I ✓  
STREET: 2200 CLARENDON BOULEVARD ✓  
SUITE 1400 ✓  
CITY: ARLINGTON ✓  
STATE/COUNTRY: VA ✓ ZIP: 22201 ✓  
EMAIL:  
APPLICATION TITLES:  
USE OF **ROR** RECEPTORS FOR SCREENING SUBSTANCES USEFUL FOR THE TREATMENT  
OF ATHEROSCLEROSIS ✓

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/646,924	<b>FILING DATE</b> 09/25/2000 <b>RULE</b> -	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> MERCK 2157	
<b>APPLICANTS</b> Eric Raspe, Mouscron, BELGIUM; Yves Bonhomme, Charbonniess Les Bains, FRANCE;  <b>** CONTINUING DATA **</b> <i>SPC</i> ***** THIS APPLICATION IS A 371 OF PCT/EP99/02001 03/24/1999  <b>** FOREIGN APPLICATIONS **</b> <i>SPC</i> ***** FRANCE FR 9803475 03/29/1998  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 11/07/2000 -					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and Acknowledged <i>Brake</i> Allowance Examiner's Signature <i>SPC</i> Initials		<b>STATE OR COUNTRY</b> BELGIUM	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b>  Millen White Zelano & Branigan Arlington Courthouse Plaza I Suite 1400 2200 Clarendon Boulevard Arlington ,VA 22201					
<b>TITLE</b> <i>ROR</i> Use of <del>for</del> receptors for screening substances useful for the treatment of atherosclerosis					
<b>FILING FEE RECEIVED</b> 918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		